

PARTI LOBBYIST

NAME(Last)

## HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

(First)

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STATE OF HAWAH STATE ETHICS COMMISSION

TELEPHONE

## LOBBYIST REGISTRATION FORM (Type or Print Clearly)

(Middle)

MAILING ADDRESS (Street)	FAX	
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17.11.15 av 30107		
1000 DX 28107		
(City) (State)	(Zip Code)	
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EMPLOYING ORGANIZATION (Fill in only if you are employed by a business e	ntity which has been retained to lobby) TEL	EPHONE
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MAILING ADDRESS (Street)	FAX	
(City) (State)	(7:0 1)	
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PART II ORGANIZATION		
PART II ORGANIZATION  NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	L/A TELE	PHONE
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	HAWAII	PHONE
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)  BUILDING OWNERS AND MANAGE OF	HAWAII	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)  BUILDING OWNERS AND MANAGER  MAILING ADDRESS (Street)	HAWAII	PHONE 847-0143
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)  BUILDING OWNERS AND MANAGER  MAILING ADDRESS (Street)	S ASSOCIATION .	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)  BUILDING OWNERS AND MANAGER MAILING ADDRESS (Street)  P.O. BOX 17040	S ASSOCIATION FAX	847-0143
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)  BUILDING OWNERS AND MANAGE OF	HAWAII PS ASSOCIATION FAX	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)  BUILDING OWNERS AND MANAGER  MAILING ADDRESS (Street)  P.O. BOX 17040  (City) (State)	FAX (Zip Code)	847-0143
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)  BUILDING OWNERS AND MANAGER  MAILING ADDRESS (Street)  P.O. BOX 17040	HAWAII PS ASSOCIATION FAX	847-0143
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)  BUILDING OWNERS AND MANAGER  MAILING ADDRESS (Street)  P.O. BOX 17040  (City) (State)	HAWAII PS ASSOCIATION FAX (Zip Code) 96817	847-0143
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)  BUILDING OWNERS AND MANAGER  MAILING ADDRESS (Street)  P.O. BOX 17040  (City) (State)  HONDLULU, HI	HAWAII PS ASSOCIATION FAX (Zip Code) 96817	847-0143 847-0142

(State)

MAILING ADDRESS (Street)

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847-0142

(Zip Code)

96817

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY				
PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBT				
Agriculture	Education	Human Services	Science, Technology & Economic Development	
Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation	
Consumer Protection Commerce	n & Hawaiian Affairs	Labor & Employment	Transportation	
Culture, Arts, Historic Preservation	C Health	Planning, Land & Water Use Management	Other: (indicate below)	
Ecology, Energy Environmental Prote	Housing ction	Public Safety & Corrections		

PART IV CERTIFICATION OF LOBBYIST

PART IV CERTIFICATION OF LOBBYIST	
I hereby certify that the information furnished above is, to the best of m	y knowledge, correct and complete.
(Signature of Lobbyist)	1/16/07 (Date)
(Cignature of Leasty).ct/	
PART V AUTHORIZATION TO LOBBY	
NAME TITLE OF AUTHO	RIZING OFFICER OR PERSON REPRESENTED
\ \tag{\tag{\tag{\tag{\tag{\tag{\tag{	ESIDENT
	TELEPHONE
HAW!	4(1
NAME OF ORGANIZATION (if applicable)  HAW.  BUILDING OWNERS + MANAGERS ASSOCI	ATION 847-0143
MAILING ADDRESS (Street)	FAX
P.O. Box 17040	847-0142
(City) , (State)	(Zip Code)
HONOLULU HI	96817
I hereby authorize the above - named person to engage in lobbying ac	ctivities on behalf of the undersigned.
Dennis Tellum, Preside	nt 1/18/07
(Signature of Authorizing Officer or Person Represented)	(Date) <sup>/</sup>